Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

9218

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		CLAIMS A	S FILED	- PART I	PÁRT I			SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		,	TYPE [OF			
TOTAL CLAIMS			17					PATE	FEE	7	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20= *					X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			5 minus 3 = * 7			/		X43=	86	OR	X86=		
ΜL	ILTIPLE DEPE	NDENT CLAIM P	RESENT					1 15		1	.000		
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2			•	+145=	C : 1	OR	+290=			
CLAIMS AS AMENDED - PART II								TOTAL	471	OR	TOTAL		
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
		I CLAIMS	i	HIGHE		1	7 r			-			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		XS 9=		OR	XS18=		
AME	Independent	*	Minus	***		<u> </u> =		X43=		OR	X86=		
Ľ	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		J	+145=		1	+290=		
		•					L			OR			
			•	•			۵	TOTAL DDIT, FEE		OR ,	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	ın 2)	(Column 3)	_			_			
	-	CLAIMS		HIGHE	ST		1 г		ADDI-	1 1	·	ADDI	
8		REMAINING	Į	NUMB	ER	PRESENT	1 1	1		1 1		ADDI-	
 		AFTER	!	PREVIO	USLY	EXTRA	i 1	RATE	TIONAL	i I	RATE	TIONAL	
T I		AMENDMENT		PAID F	OR	1	1 i		FEE	1 1		FEE	
AMENDMENT B	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
`	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT (CLAIM		l ⊦					······································	
								+145=		OR	+290=		
								TOTAL	<i>-</i> .	OR	TOTAL		
							Ai	DDIT. FEE		/	ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)							
	\	CLAIMS		HIGHE					ADDI			4001	
ပ		REMAINING		NUMB		PRESENT			ADDI-			ADDI-	
5	,	AFTER		PREVIOL		EXTRA		RATE	TIONAL	f	RATE	TIONAL	
⊒ ∤		AMENDMENT		PAID F	OR				FEE			FEE	
<u>Ş</u>	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=		
T	Independent	*	Minus	***		= .	╽┣	X43=			X86=		
<u> </u>	посренает		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	∧00≈		
AME		NTATION OF ML	ILTIPLE DEP	ENDENT (L 1 1		-					
#		NTATION OF ML	ILTIPLE DEP	ENDENT (+145-		[1300-		
	FIRST PRESE					ımn 3		+145=		OR	+290=		
• If	FIRST PRESE the entry in colur the "Highest Nur	mn 1 is less than the	e entry in colur	nn 2. write "(0" in colu	20. enter "20."	L	TOTAL		L	TOTAL		
• If	FIRST PRESE the entry in colur the 'Highest Nur the 'Highest Nur	mn 1 is less than th	e entry in colur id For" IN THIS id For" IN THIS	nn 2. write "(S SPACE is I	0" in colu	20, enter "20." 3, enter "3."	L AE	TOTAL DIT FEE		OR A	TOTAL DDIT FEE		